

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 3/24/03.

I. DISPUTE

Whether there should be reimbursement for monitored anesthesia – 00630-46, dated 7/8/02, and denied on the basis of “N – not appropriately documented. Report submitted does not appear to substantiate level of service billed.”

II. RATIONALE

The medical documentation submitted by the requestor (much of which was illegible) was the anesthesia record. It confirmed 1 hour and 5 minutes of anesthesia and verified the service was performed by CRNA, ____.

The modifier billed –46 indicated the use of a CRNA (Certified Registered Nurse Anesthetist). On this basis, the documentation submitted supported the level of service billed; therefore, reimbursement is recommended.

III. DECISION & ORDER

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is** entitled to reimbursement for 00630-46 in the amount of **\$455.00**. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby **ORDERS** the Respondent to remit **\$455.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order and are hereby issued this 1st day of October, 2004.

Noel L. Beavers
Medical Dispute Resolution Officer
Medical Review Division

NLB/nlb